

Virginia Board of Bar Examiners

Admission Without Examination

COVER PAGE

SAMPLE

VIRGINIA BOARD OF BAR EXAMINERS

Office of the Secretary
2201 West Broad Street
Suite 101
Richmond, Virginia 23220-2022
804-367-0412

APPLICATION FOR
ADMISSION WITHOUT EXAMINATION

Processor:

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 Version 2.0 - Submitted March 31, 2014

For Admission to Practice in the Commonwealth Without Examination
Pursuant to Rule 1A:1 of the Supreme Court of Virginia

I hereby apply for a certificate to practice law in the Commonwealth of Virginia, under the Regulations governing Applications for Admission to the Virginia Bar pursuant to the Supreme Court of Virginia Rule 1A:1.

Section 1 - Personal Information**1.1 Full legal* name**

Ms.	Jane	Smith	Doe	
Title	First Name	Middle Name	Last Name	Suffix

*You must apply in your **FULL LEGAL NAME** as it appears on your birth certificate or name change order. Initials are not acceptable unless initials are part of your full legal name. If you are married and if you have not changed your name with the Social Security Administration or never assumed your spouse's last name on any educational, financial or legal documents, your full legal name would be your maiden name. If you have assumed your spouse's last name, your middle name may be your middle name as shown on your birth certificate, your maiden name, or both if you so choose.

1.2 Provide your current mailing address, email address, daytime telephone number, and date of birth.

Street	123 Happy Street			
Apt	Apt. 15			
City	Richmond	State	VA	ZIP 23220
Daytime phone	(888) 849-3928	County	Henrico	
Email address	janesdoe@gmail.com	Date of Birth	January 1, 1985	

1.3 Social Security Number 999-99-9999or **Virginia** Department of Motor Vehicles Control Number:

Disclosure of your Social Security Number or Virginia Dept. of Motor Vehicles control number is required by §54.1-116 of the Code of Virginia and assists in expediting the character review process.

YES 1.4 Are you currently employed?

Employer	Jones, Jones & Jones
Street	123 Main Street
City	Richmond
Phone Number	(804) 555-1212
Position	Associate
Send correspondence to:	Mailing

State	VA	ZIP	23220
Fax Number	(804) 555-1213		
Supervisor or Department	Mr. Jones		

Section 2 – Minimum Threshold Requirements

If you answer **NO** or **FALSE** in Section 2 - Minimum Threshold Requirement, you **do NOT qualify** for admission without examination in Virginia:

I hereby represent as a part of my application for admission without examination to the Virginia bar and licensure to practice law in Virginia (i) that I have read the Regulations governing Applications for Admission to the Virginia bar Pursuant to Supreme Court of Virginia Rule 1A:1 adopted by Order entered December 13, 2013, and (ii) that I satisfy every threshold requirement for eligibility to apply for admission without examination, including without limitation the following:

- 2.1** I received a Juris Doctor degree from:
Law School: **Brooklyn Law School**
Graduation Date: **January 15, 2009**
School Code: **6.**

YES **At the time of my graduation, such law school was approved by the American Bar Association.**

YES **(A)** I attach hereto an official transcript from such law school which shows all course work completed, grades received, the type of degree awarded. (The transcript must be under school seal and signed by the law school dean or registrar.)

True **2.2** I have not failed any bar examination given by any state or territory of the United States or by the District of Columbia within the five (5) years immediately prior to submitting this application for admission to the Virginia bar.

True **2.3** I have not failed more than two (2) bar examinations in any state or territory of the United States or in the District of Columbia.

YES **2.4** My Reciprocal Jurisdiction is **New York**, which is a state or territory of the United States or the District of Columbia.

YES **(A)** I was admitted by examination to **New York**.

YES **(B)** I am a member in good standing of the court of last resort of **New York**.

YES **(C)** I have independently determined that **New York** permits lawyers licensed in Virginia to be admitted to practice in such jurisdiction without examination.

YES **(D)** I will attach the Verification of Reciprocity form, confirming my admission to practice law before the court of last resort of **New York**, signed by a presiding judge of said court.

YES **2.5** I have been admitted to practice law before the court of last resort for at least five (5) years in the following state(s), territories of the United States, or the District of Columbia.

Jurisdiction(s): **New York, Massachusetts**

YES **2.6** I have been engaged in the full-time active practice of law for at least three (3) years (36 calendar months) out of the past five (5) years immediately prior to submitting this application for admission to the Virginia bar; during each month for which I claim credit for the full time active practice of law I have held an active license to practice law in each state, territory, or the District of Columbia where I practiced; and during each such month my law office was physically located within the state, territory, or the District of Columbia where I was so licensed and where I practiced. [Exception for: Judge Advocate General, Assistant U. S. Attorney, law clerk for state or federal judge (Answer Yes)]

- YES 2.7** It was a requirement of each position for which I claim credit for the full-time practice of law in a jurisdiction that I hold an active license to practice law in the state, territory, or the District of Columbia where my office was located and where I performed the duties of such position. If anyone were to work in such position without an active and unrestricted license to practice law in such jurisdiction, he or she would be engaged in the unauthorized practice of law in such jurisdiction. [Exception for: Virginia Corporate Counsel, Judge Advocate General, Assistant U. S. Attorney, law clerk for state or federal judge (Answer Yes)]
- YES 2.8** I have completed Rule 1A:1 Reciprocity Course(s) approved by the Virginia Mandatory Continuing Legal Education Board within the preceding six-month period.
- YES 2.9** I will attach the RULE 1A:1 RECIPROCITY COURSES AFFIDAVIT and Certificate of Attendance certifying completion of approved course(s).
- YES 2.10** I have read and am familiar with the Virginia Rules of Professional Conduct (VRPC), and I will complete and submit the VRPC Affidavit (included at the end of the admission without examination application form).

Section 3 – Prior Applications

- YES 3.1** Have you ever made a prior bar application for admission to the Virginia Bar?

Type of Application	Application Date or Exam Date	Results
Exam	Dec 2013	Did not take exam due to Rule change and became eligible for admission without examination

- 3.2** Other than Virginia, list ALL bar applications submitted to any jurisdiction whether you were admitted to such jurisdiction or not.

Jurisdiction	Application Date	Application Type	Application Status	Admission Status
New York	Jan 2010	Exam	Pass	Active
Jurisdiction	Application Date	Application Type	Application Status	Admission Status
Massachusetts	Dec 2009	Exam	Pass	Inactive

- NO 3.3** Have you ever held a Virginia Corporate Counsel Certificate under Rule 1A:5?
If yes, state date admitted, name of corporate employer, and current admission status.
- YES 3.4** For each jurisdiction where I have ever been admitted (including Virginia Corporate Counsel), I attach a Certificate of Good Standing, dated within 90 calendar days prior to submission, from the court of last resort for each such jurisdiction, in accordance with Rule 1A:1(b)2.
- YES 3.5** For each jurisdiction where I have ever been admitted (including Virginia Corporate Counsel), I attach a Certificate of Discipline, dated within 90 calendar days prior to submission, from the disciplinary authority that handles complaints against lawyers. Such certificate must provide all relevant information, reports, findings, documents and correspondence of any kind concerning my performance as a lawyer.

PLEASE NOTE:

- If you have **any** pending disciplinary matters in any jurisdiction, your application will not be processed and your application fee is non-refundable.
- A Certificate of Discipline is required even if you are on inactive status. Check with the proper authority because you may be required to execute an authorization and release form.

Section 4 – Current Office Location

- YES 4.1** Are you currently practicing law?
The physical address of the office from which I currently practice law.

Street **123 Main Street**

City **Richmond**

State **VA**

ZIP **23220**

- YES 4.2** Is this office in Virginia?
Provide below a description of your current practice and the authority that permits such practice in Virginia without a Virginia law license.

I am currently only doing research on cases that are based in Virginia, such as paralegal duties. While I have been in Virginia, I have done some Federal Court work on a few cases utilizing my New York law license. The controlling authority is Rule 5.5 and (d)(4)(i-iv) of Virginia's Rules of Professional Conduct.

Section 5 – Acknowledgements

- YES 5.1** I understand that if all information requested in this application, including the Character & Fitness Questionnaire and ALL attachments, is not full and complete on its initial submission, the application will not be processed until it is full and complete.
- YES 5.2** I acknowledge that this is a continuing application process and if any answer in this application or in my Character & Fitness Questionnaire changes prior to my admission to the bar, I am required to notify the Board immediately and in writing of such change. Failure to do so may be grounds for denying my application.
- YES 5.3** I acknowledge that each of the facts, certifications, and representations provided in this application or in my Character & Fitness Questionnaire is material to my application for admission to the Virginia bar and licensure to practice law in Virginia; I have read Section § 54.1-111 of the Code of Virginia, and I understand the penalty for willfully misrepresenting a fact in an application for licensure.

Section 6 – Additional Required Regulation Attachments

The following documents **are required to be filed** as part of every **Application for Admission Without Examination**.

Minimum, Current and Practice of Law

YES 6.1 I attach a detailed summary in a separate document, in resume format, of my past practice of law - including the following:

- Employer Name*
- Employer's address (physical office location)**
- Employer's phone and fax number
- Supervisor's name
- Precise Month and Year of Employment
- Hours worked per week for each employer
- Description of legal practice

*If you are a firm owner or partner (and not considered self-employed), you must submit wage documentation, such as a W-2 or K-1, to substantiate your full-time employment.

**If employer is no longer at the physical office where you were employed, provide current address, phone and fax number. If employer no longer exists, submit name of verifying reference, reference's current address, phone and fax numbers. Such employer/reference must be able to verify the employment dates and all other information you have submitted.

YES 6.2 Within the past five years, has any of your practice of law included periods of self-employment?

I attach all applicable documents to substantiate my self-employment:

- Federal Income Tax Return Forms, including all Schedules (for each year of self-employment within the last five years)
- Copy of lease(s) for office(s) from which you practiced law on a full-time basis
- Certificate of Judge (will print with forms)
- Three client references - (client name, address, phone and fax number, time period of representation)
- Notarized Affidavit under oath certifying that your self-employment was the full-time practice of law.

Assessment of Fitness and Progress

YES 6.3 I enclose an original and one copy of my Character & Fitness Questionnaire (both with original Notary) and ALL required attachments.

Fees

YES 6.4 I enclose a **cashier's check, certified check or money order** made payable to "Virginia Board of Bar Examiners" in the amount of \$1,500.00. **No personal, firm or company checks accepted.** This filing fee covers the cost of processing the application, preparation of the Character Report and investigation of matters contained in the completed Character Report. I understand that this filing fee is **non-refundable** and that it is my responsibility to determine that I have satisfied all threshold requirements before submitting my application. In the event this application for a license to practice law in Virginia without examination is denied and I decide to sit for the Virginia Bar Examination, I acknowledge that I must submit a separate bar exam application and pay the appropriate filing fees.

Authorization and Release

By filing this application, I hereby:

- A. Authorize and request every person, firm, corporation, association and agency having control of any documents, records or other writing, or having other information pertaining to me to furnish to the Board any such writings and information the Board believes will relate to my moral character and/or fitness to engage in the practice of law, and to permit the Board and any of its agents or representatives to inspect and make copies of such documents, records, and other writings.
- B. Agree that all information provided by this application, and all other information received by the Board and believed by it to have a bearing upon my moral character and/or fitness to engage in the practice of law, may be released by the Board at any time, and without liability to the Board, its members, agents, or other representatives, to any judicial, executive or legislative official, or to any investigatory or regulatory body or agency, when the Board considers such release to be reasonably needed by such official, body or agency in response to its inquiry relating to my moral character and/or fitness to engage in the practice of law.
- C. Agree that the foregoing shall remain in effect for any future application that I may make to the Board.

Signature of Applicant

Commonwealth/State/District of _____

County/City of _____

I, a Notary Public of such County/City, certify that on this day personally appeared before me

Jane Smith Doe

who thereupon made oath that all statements contained in this application are true and complete.

Given under my hand this _____ day of _____, _____

My commission expires on _____, _____

Notary Public

Registration Number (if applicable) _____

NOTARY SEAL (must be affixed)

Revised March 2014

VERIFICATION OF RECIPROCITY FORM

STATE of _____/DISTRICT OF COLUMBIA:

I, _____, Justice/Judge of the _____
Court of the State of _____/District of Columbia, which is the court of last
resort in said State/District, do hereby certify that _____
was admitted to practice law before such court on _____ (m/d/yyyy).

I further certify that this authority is responsible for bar admission requirements for this jurisdiction and that
attorneys from the Commonwealth of Virginia (check one) ☐ are; ☐ are not admitted to practice law on motion or
reciprocity in the State/District without requiring a written bar examination provided other requirements of this
jurisdiction are met.

Given under my hand this _____ day of _____, 20_____

Signature: _____

Typed Name: _____

Justice/Judge of the _____ Court of
the State of _____/District of Columbia

I, _____, Clerk of the _____, do
hereby certify that _____ whose name is signed to
the foregoing certificate, was at the time of signing said certificate a Justice/Judge of the court of last resort of the
State of _____/District of Columbia, and that the foregoing is his/her true and genuine
signature.

Witness my hand and the seal of said court, this _____ day of _____, 20_____

Signature: _____

Typed Name: _____

Clerk of the _____

(SEAL)

CERTIFICATE OF JUDGE

THIS IS TO CERTIFY that I, _____
the undersigned, am a judge of _____
a court of record of the State/District of _____;
that I have known the petitioner _____ for _____
years; that the petitioner is a person of good moral character; that the petitioner is now a member of the Bar in good
standing of the above named State/District and has been continuously engaged as a full-time practitioner of law in
_____ from _____ to _____.

Date

Signature

(Court Seal, if applicable)

RULE 1A:1 RECIPROCITY COURSES AFFIDAVIT

I, **Jane Smith Doe**, after first being duly sworn, certify that I have completed the following Rule 1A:1 Reciprocity Courses approved by the Virginia Mandatory Continuing Legal Education Board within the preceding six-month period (minimum of 12 hours required), and I attach the Virginia MCLE Board Certificate of Attendance.

Course ID#	Sponsor	Course/Program Title	Approved CLE Credits	Date Completed
V1A:1234	Fellows of Virginia Law Foundation	Rule 1A:1 Reciprocity Course	12	February 15, 2014

Signature of Applicant

Commonwealth/State/District of _____

County/City of _____

I, a Notary Public of such County/City, certify that on this day personally appeared before me

Jane Smith Doe

who thereupon made oath that all statements contained in this application are true and complete.

Given under my hand this _____ day of _____, _____

My commission expires on _____, _____

Notary Public

Registration Number (if applicable) _____

NOTARY SEAL (must be affixed)

Revised March 2014

VIRGINIA RULES OF PROFESSIONAL CONDUCT (VRPC) AFFIDAVIT

I, **Jane Smith Doe**, after first being duly sworn, certify that I have read and I am familiar with the Virginia Rules of Professional Conduct (VRPC).

Signature of Applicant

Commonwealth/State/District of _____

County/City of _____

I, a Notary Public of such County/City, certify that on this day personally appeared before me

Jane Smith Doe

who thereupon made oath that all statements contained in this application are true and complete.

Given under my hand this _____ day of _____, _____

My commission expires on _____, _____

Notary Public

Registration Number (if applicable) _____

NOTARY SEAL (must be affixed)

Revised March 2014